

**EMT-1 REGULATORY TASK FORCE**  
**MEETING MINUTES**  
**February 20, 2001**  
**Ontario International Airport**

**I. Introductions**

Self-introductions were made. The most recent Task Force membership list was distributed and attendees were asked to make any corrections to the membership list on the sign-in sheet that was circulated. The Task Force was reminded that the EMT-I Task Force list server is a good source of information concerning the Task Force. Information that goes out on the list server includes meeting agendas, meeting minutes, reminders about meetings, attachments for meetings and any questions or information the subscribers wish to post. The e-mail address [emt1regs@emsa.ca.gov](mailto:emt1regs@emsa.ca.gov) and in the subject line type the word "join" or "subscribe".

<b>MEMBERS PRESENT</b>	<b>EMSA STAFF PRESENT</b>	<b>ALTERNATES PRESENT</b>	<b>MEMBERS ABSENT</b>	<b>ALTERNATES ABSENT</b>
Bob Cordray	Sean Trask	Karen Petrilla	Nancy Casazza	Bruce Kenagy
Elaine Dethlefsen	Lois Williams	Veronica Sheppardson	Jean English	David Nevins
Donna Ferracone			Bruce Haynes	Jeff Page
Pat Kramm			Gloria Huerta	Byron Parsons
Dave Magnino			Steve Maiero	Debbie Notturmo
Tom McGinnis			Marco Randazzo	
Debbie Meier			Bob Repar	
Debi Moffat			John Tysell	
John Pritting				
Susan Smith				
Kevin White				
Todd Wilhoyte				

**II. Minutes**

Approved as written.

**III. Agenda**

Approved as written.

**IV. Old Business**

- A. Committee Report: Comparison of Responsibilities between EMSA and LEMSA's (Sub-committee members: Pat Kramm, Steve Maiero, Bruce Kenagy, Debi Meier):
- This committee surveyed local EMS agencies (LEMSAs) in California to compare responsibilities between the LEMSAs and the State EMS Authority (EMSA). The surveys were tallied and the results were distributed to the Task Force members. Sean is also working on a separate survey of certification fees for the EMSA and those results were distributed because some of Sean's survey questions were in-line with the sub-committee's original survey. After a lengthy discussion, the following points were identified:
1. The survey revealed multiple inconsistencies between different processes at the local EMS agency level such as EMT-I training program approval processes, qualifications for training program approval reviews, certification fees, EMT licensing fees.

2. There are additional expenses related to EMT-I certification that were not included in the survey such as: ambulance driver certificate from the DMV, medical examiner certificate, fingerprints (from those agencies that require fingerprints), etc.
3. The Task Force recommended that a person at the approving authority for EMT-I training program review have a background in education. To meet this recommendation, some suggestions were State Fire Marshal's Instructor 1A and 1B, or other teaching credentials.
4. The Task Force is not going to standardize fees by the local EMS agencies, but will be able to standardize certain processes in the regulations.
5. A recommendation was made that EMT-Is maintain current CPR certification during their certification period.

B. Committee Report: Exam Administration (Sub-committee members: Gloria Huerta, Debi Moffat):

The Task Force discussed the following points:

1. The Task Force agrees that a standardized exam is needed.
2. Other states have volunteers that develop and validate their certification exams. This process is very costly, labor intensive, time consuming and must be repeated frequently. Validity and reliability cannot be guaranteed without massive use and analysis. It is hard to create an exam and validate the test questions.
3. EMT-I certification exam options are very limited.
4. The National Registry offers a cost effective, valid and reliable without massive analysis.
5. The Task Force needs a table comparing the various options.
6. John Pritting recommended making a decision on this issue since the alternatives are very limited.
7. The Task Force will invite a representative from the National Registry to give a presentation at the next Task Force meeting. Task Force members are asked to poll their constituents for questions for the National Registry representatives.
8. The Task Force feels that it is imperative to keep a high standard of test security as basis for the decision of selecting an appropriate exam process.

C. Committee Report: Licensure Issues (Sub-committee members: Gloria Huerta, John Pritting, Kevin White):

1. The issue of background checks was discussed, as well as, the difficulty of sharing criminal background check information. One of the items in Sean's survey asked if the LEMSA required fingerprints for criminal background checks. Of the 20 LEMSAs that responded to the survey, seven indicated they require fingerprints in some fashion; four LEMSAs were developing the process for requiring fingerprints. Sean indicated that the EMSA is considering combining the idea of an EMT-I registry with the current local EMS agency (LEMSA) certification process (collecting fees, applications, necessary attachments); adding criminal background checks to be forwarded to EMSA and have the EMSA issue EMT-I certifications. This way the EMSA can control the criminal background information and the LEMSAs can collect the certification fees. This idea is only in the concept phase and if implemented would require a change in statute.
2. Some LEMSAs require an additional application and fee, for some EMT-Is to practice in their systems, even though the EMT-I has a current and valid EMT-I certification within California. The Task Force recommended deleting the second sentence of Section 100061 of the Regulations, which reads, "Such authorization assures that the EMT-I has been oriented to the local EMS system and trained in the skill(s) necessary to achieve the treatment standard of the jurisdiction."
3. Another suggestion was for EMSA to be the recipient of criminal background information and issue a card or other form of verification that the applicant or

certificate holder is not precluded from EMT-I certification. The same issues apply in that DOJ criminal background information cannot be shared and if an applicant or certificate holder is precluded from EMT-I certification based on their criminal background information, EMSA would have to investigate and provide due process. Currently, the paramedic enforcement unit is not staffed to take on this added workload.

4. Sean distributed a handout on the comparison between EMT-I continuing education (CE) requirements and paramedic CE requirements. The handout illustrates many inconsistencies between EMT-I and paramedic CE requirements. Currently, there are no limitations in the EMT-ICE regulations, as long as, the CE basic life support knowledge and skills to include airway management, CPR and automated external defibrillation. The paramedic regulations have restrictions on certain types of CE such as teaching certain courses, media based courses, self paced courses, etc. One suggestion the Task Force made was making the EMT-I CE requirements consistent with the paramedic CE requirements. Another suggestion was to require a certain portion of CE be made up of certain topics, since the Task Force is recommending eliminating EMT-I recertification testing, thereby maintaining some level of proficiency.

D. Committee Report: EMT Approving Authority (Sub-committee members: Elaine Dethlefsen, Donna Ferracone, Debi Moffat, Kevin White):

This committee previously suggested that the EMSA approve all EMT-I training programs in California and assemble a group of experts to conduct training program site visits. In order to accomplish this there would have to be a change in statute and additional staff at EMSA. An alternative would be to develop a standardized EMT-I training program review and approval process that would continue at the LEMSA level.

Sean will check on the feasibility of changing statute to meet two of the Task Force's objectives (centralized certifying authority and centralized training program approval process) and report back to the next meeting.

Next meeting March 21, 2001 in Sacramento, from 10:00 AM to 4:00 PM, location to be determined later. The Task Force members agreed to meet on the third Wednesday of each month to coincide with the EMT-P Task Force, since some members sit on both committees.

Recorder: Karen Petrilla